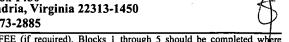
## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

(571) 273-2885 or Fax



|  | indicated unless corrected below or directed otherwise in Block 1, by (a maintenance fee notifications.  CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)  11/01/2005  IBM MICROELECTRONICS INTELLECTUAL PROPERTY LAW 1000 RIVER STREET 972 E ESSEX JUNCTION, VT 05452 12/22/2005 MBEYENE2 00000215 090456  1 FC:1501 1400.00 DA |                 |            |  | Note: A certificate o<br>Fee(s) Transmittal. T<br>papers. Each addition<br>have its own certifica   | CATION FEE (If required). Blocks I through 5 should be completed where of maintenance fees will be mailed to the current correspondence address as correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.  Certificate of Mailing or Transmission  I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.  (Depositor's name) |                       |  |
|--|--|-----------------|------------|--|---|--|-----------------------|--|
|  |  |                 |            |  | (Signature) (Date)  |  |                       |  |
|  | C-1504 300.00 DA APPLICATION NO. FILING DATE   |                 |            | CIDST NAME   | DINVENTOR   | ATTORNEY DOCKET NO.  | CONFIRMATION NO.      |  |
| Į.   | 10/065,365 10/09/2002  |                 |            | FIRST NAMED INVENTOR  Robert W. Bassett  |   | BUR920010209   | 7874                  |  |
| 1  | APPLN. TYPE  |                 |            | EE<br>)  | PUBLICATION FEE<br>\$300  | TOTAL FEE(S) DUE   | DATE DUE 02/01/2006   |  |
| 1  | EXAMINER BRITT, CYNTHIA H  |                 | ART UN     | 'IT  | CLASS-SUBCLASS  | ٦  |                       |  |
| '  |  |                 | 2133       |  | 714-724000  | J  |                       |  |
|  | 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  Mi "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.                     |                 |            |  | 2. For printing on the patent front page, list  (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. |  |                       |  |
| 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)  PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. |  |                 |            |  |   |  |                       |  |
|  | (A) NAME OF ASSIGNI<br>national Busine   | ess Machines Co | orporation | , Armor  | •   | ,  | . 0.                  |  |
| Please check the appropriate assignee category or categories (will not be printed on the patent):  |  |                 |            |  |   |  | oup entity Government |  |
|  | Issue Fee Publication Fee (No small entity discount permitted)   |                 |            |  | ☐ A check in the amount of the fee(s) is enclosed.  |  |                       |  |
|  |  |                 |            |  | Payment by credit card. Form PTO-2038 is attached.  |  |                       |  |
|  | ☐ Advance Order - # of   |                 |            | XX The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 09-0456 (enclose an extra copy of this form). |   |  |                       |  |

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Authorized Signature

☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

Typed or printed name \_ Anthomy Registration No.

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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5. Change in Entity Status (from status indicated above)

a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.